## Geriatrics and Gerontology Advisory Committee October 3, 2005

Itamar Abrass - Chairman
Normal Abeles
Bob Carbonneau
John Derr
Terry Fulmer
Marcia Holt-Delaney
Mary Jane Koren
Richard Veith
Jim Burris (VACO Staff)
Susan Cooley (VACO Staff)
Ken Shay (VACO Staff)

Itamar began the meeting by stating that this would be a review of the GGAC site visit reports for Los Angeles (West LA and Sepulveda), Gainesville, and St. Louis. He stated that he would review these in the order in which they were conducted. He first asked if there were any questions on the reports and there were none.

He reviewed the major findings from the Los Angeles report. Norm asked by what means were the non-productive staff identified at the Los Angeles GRECCs going to be resolved. Itamar responded that management had recognized the problem but had not yet initiated the necessary steps. The Chief of Staff has provided the necessary guidance, and documentation of under-performance should now be underway. John asked what the procedure would be for following up on the recommendations to the report. Itamar said that a time line would be provided in the cover letter; it is usually 60 days. Bob asked about the research space and whether it was realistic to expect renovation. Itamar acknowledged that the space was old and had not been renovated for a long time and commented that renovation would likely be part of a recruitment package for a new director. Susan Cooley raised her concern that a statement regarding risk to GEM unit patient safety posed by the location of the unit presented a potential liability risk in the report. Ken reported that he had, on the advice of Dr. Burris and Cooley, spoken to Michael Mahler, Acting Associate Chief of Staff for Geriatrics and Extended Care, who had expressed his appreciation for the notification of the concern, but noted that the situation had existed like that for several decades and that no incident had ever occurred. Itamar noted that this concern had been raised by GRECC staff who are also concerned over the level of staffing with respect to the complexity of the patients. Susan requested that a note be added to the report that the concern was shared with GLA Management. Ken agreed to change it. A vote was taken and those present unanimously agreed to accept the report.

Itamar then turned to the Gainesville report. Richard noted that the report reflected many positive attributes for the GRECC. Mary Jane concurred; and stated that it was relief to have visited a GREEC where there was high level support evident. Itamar shared with others that there was a new director who enjoyed a high level of support both within the

VA and the university affiliate. Bob asked about the 1997 visit and noted that the report had specified at that time the need for a veteran services organization member of the GRECC advisory committee. The most recent meeting of the advisory committee had not contained a VSO--what happened? Itamar clarified that this was the first advisory committee meeting since the new director had joined the program and that he had definite plans to address this concern. He went on to specify that Dr. Mulligan intends to use his advisory committee in a truly advisory capacity. Dr. Cooley clarified for Bob that the prior GRECC director had been seriously ill and incapacitated; and then an acting director was in place for several years. The new director, Dr. Mulligan, comes with a great deal of energy and is very attentive to the GRECC Criteria and Standards. Dr. Veith noted that there was a need for some editing of the section of the report calling attention to the lack of activity in formalizing the appointment of the associate director for education and evaluation; Dr. Shay agreed to revise this. Dr. Abrass called for a vote, and again, those present agreed to accept the report.

Itamar then turned to the St Louis report. Terry Fulmer stated that the report was extremely detailed and that therefore she had no questions. Itamar clarified that the biggest concern was that the VISN director seemed relatively under-informed about GRECCs in general and this GRECC specifically. There was also concern about the extent of the research program; although it accounts for 40% of the St. Louis research program, that research program is modest and so is the St. Louis GRECC's. An additional concern is that Dr. Morley, the GRECC directory, has made it clear that he prefers to raise funds in ways that do not include writing grants. Once again, the committee voted and agreed unanimously among those on the call to accept the report as written. Ken will prepare transmittal memoranda for Dr. Abrass's signature and these will be sent to the directors of the facilities through the VISN directors.

Before closing, Ken noted that a final draft of the White Paper will be circulated shortly for final review before it is sent to top VHA administration.